OCT 1'7 2008

LOCAL LIMITS

NAME:	CORAL	DYEING	&	FINISHING	CORP.
			_		The state of the s

MAILING ADDRESS: 555 EAST 31st ST., PATERSON, NJ 07513

FACILITY LOCATION: 555 EAST 31st ST., PATERSON, NJ 07513

CATEGORY & SUBPART N/Z PERMIT # 27400050 OUTLET #: 1

CONTACT OFFICIAL: DREW RUPELL I have been authorized to certify non-use for the following heavy metals:

TELEPHONE #:973-278-0272

Arsenic	Lead X	Zinc	SAMPLE DATE
Cadmium <u>x</u>	Mercury x		MONTH DAY YEAR
Chromium	Molybdenum		9 3 08
Copper	Nickel _x	_	

PARAMETER			CONCENTRATION		SAMPLE TYPE	
		RESULT	THRESHOLD VALUE EXCEEDED YES OR NO	UNITS	COMP/GRAB	
CADMIUM	Sample Measurement	1.0041		mg/l		
	Threshold Value	.005		mq/1	COMP	
LEAD	Sample Measurement	.0115		/2		
BBAD	Threshold Value	.029	020212220	mg/l	COMP	
	Sample Measurement	4,0002	18 10 0 2 2 3 2 3 2 3 2 3 3 3 3 3 3 3 3 3 3	mg/1	 	
MERCURY	Threshold Value	.001 /		a liig/I	COMP	
MICKET	Sample Measurement	6.01	NOV 2008	272mg/]		
NICKEL	Threshold Value	.02	2 nd Input	Smay I	COMP	
	Sample Measurement			<u>w</u> /	*	
	Threshold Value		101681345651		/	
	Sample Measurement			*	/	
	Threshold Value	600202	425263		. /	
	Sample Measurement	182	200		/	
*	Threshold Value	200	00/20 33		X	
	Sample Measurement	198	AUN 23			
	Threshold Value	de 13	~ ~			
	Sample Measurement	2140	1878ch			
	Threshold Value	-016	- 181			

PVSC Form MR-3 10/96

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		owing h												
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	Cd		Cu		Hg		Ni					¥		
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			*											moer.
(2)	(a)	applic	able pr	ior for	ms an	d here	lata on by certi wing h	fy that	we h	ave no	f this for	orm and	any non-use	e .
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		Arseni	4		Сор	per		Mo	olybde	enum				
		Cadmi			Lea			Nic	ckel				55-	
		Chrom	iuin [_]		Mer	cury [Zin	ıc				g	
	(b)*	Means	the nur	mber c	of addi	tional	monthl	y samp	oles no	eeded	to rea	ch 3 mo	nths in	
1		success	ion wh	en the	value	is equ	al to or	below	v the	Thresh	old V	alue. I	underst	and
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		below t	he thre	shold	value	for tha	t heavy	metal.	. Th	is will	not af	fect my		
		respons	ibility	to mor	uitor in	Marc	h and S	eptem	ber as	requ	ired by	Section	n B-103	3.
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				Exe	cutive	or Auth	orized A	Agent			£. 24			
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PVSC F	orm 1	1R-3 10/	96		Type i	Name a	nd Title	.10						

N. J. TELEPHONE (973) 278-0272 (973) 278-0276

N. Y. C. TELEPHONE (212) 736-4364 FAX NUMBER (973) 278-9490

Coral Dyeing & Finishing Corp.

POST OFFICE BOX 2067
PATERSON, NEW JERSEY 07509

10/16/2008

PASSAIC VALLEY SEWERAGE 600 WILSON AVE. NEWARK, NJ 07105

TEL.:

973-817-5714

FAX:

973-344-4876

Dear Bruce,

As of today I did not receive water bill for the month of September 2008.

Reading from water meter:

8/31/2008

548720

9/30/2008

591946

43226

Total water consumtion for September 2008

43226

Thank you.

Yours truly, Dina Spence - Controller



Analytical Report



DINA SPENCE CORAL DYEING & FINISHING CORPORATION PO BOX 2067 PATERSON, NJ 07509

Regarding:

DINA SPENCE CORAL DYEING & FINISHING CORPORATION PO BOX 2067 PATERSON, NJ 07509

Account No: AW0150, CORAL DYEING & FINISHING CORPORATION Project No: AW0150, CORAL DYEING & FINISHING CORPORATION

P.O. No: PWSID No:

Inv. No: 1007770

L2750335-1	Sample Description EFFLUENT COMPOSITE Received Temp: 38 F	Iced (Y/N): Y		Samp. Date/Time/Temp 09/03/08 10:00am NA F	Sampled by Customer Sampled	,
Parameter CADMIUM COPPER NICKEL LEAD ZINC MERCURY BIOCHEMICAL TOTAL SUSPEN	EPA EPA EPA EPA EPA OXYGEN DEMAND SM	hod 200.7 200.7 200.7 200.7 200.7 245.1 5210B 2540D	Result ND mg/1 0.350 mg/1 ND mg/1 0.0115 mg/1 0.201 mg/1 ND mg/1 328 mg/1 54.2 mg/1	RLs 0.00400 mg/l 0.00300 mg/l 0.0100 mg/l 0.00500 mg/l 0.00500 mg/l 0.000200 mg/l 67.4 mg/l 2.00 mg/l	Test Date, Time, Analys 09/11/08 12:47PM B B 09/11/08 12:47PM B B 09/11/08 12:47PM B B 09/11/08 12:47PM B B 09/11/08 12:47PM B B 09/15/08 09:03PM CMC 09/04/08 03:28PM DJP 09/05/08 06:30AM GLE	st

- A result of "ND" indicates the concentration of the analyte tested was either not detected or below the RLs.
- Definitions: ND=not detected; NEG=negative; POS=positive; COL=colonies; RLs=laboratory reporting limits; L/A=laboratory accident; TNTC=too numerous to count
- A result marked with "DRY" indicates that the result was calculated and reported on a dry weight basis.
- All analysis, except field tests are conducted in Southampton, PA unless otherwise identified.
- The test"pH lab" is analyzed upon receipt at the laboratory, the result will not be suitable for regulatory purposes.
- Actual times of analysis for parameters reported <24 hrs are available upon request. All testing is completed within the required holding time unless otherwise noted.
- QC NELAP ID's:PA 09-00131,NJ PA166,FL E87954,NY 11223,CT PH-0768,DE PA-018,KY 90228,MD 206,EPA PA00018.Bioassay:PA 09-03574,NJ PA034,FL E87953,KS E10373,SC 89020001.
- QC STATE ID's:Wind Gap,NJ PA001,PA 48-01334;E RUTHERFORD NJ02015;Vineland NJ06005; Reading PA 06-03543.
- All samples are collected as "grab" samples unless otherwise identified.
- MCL= is the EPA recommended "maximum contaminant level" for a parameter. PLs=customer specific permit limits.
Regulatory authorities are assessing substantial fines for testing omissions. Please track your sample collections and results on a weekly, monthly, or quarterly basis to ensure compliance. QC's internet program 'LIVE ACCESS' will provide you with real-time access to collection dates and results. Please contact Customer Service for further information on acquiring LIVE ACCESS.

Page 1 of 1

Serial Number: 1028497

Thomas J. Hines. Presid

1205 Industrial Blvd., P.O. Box 514, Southampton, PA 18966-0514 Phone: 215-355-3900 Fax: 215-355-7231 www.qclaboratories.com

			15	FINAL REPO		B	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
MATRIX CODES DW: DRINKING WATER GW: GROIND WATER	WW: WASTEWATER SO: SOIL SL: SLUDGE OIL: OIL	SOL: NON SOLE SOLID ME: MISCELLANEOUS X: OTHER	Fleld pH, Temp (C or F), DO, Cl ₂ , S. Cond. etc.		ed By: Date/Time:	800, 4 PM IS 1600) Custode Seal Number	KINK
人 2 子 5 0 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	3.4.(C) M/NESS 等 4.	· · · · · · · · · · · · · · · · · · ·	ANALYSIS REQUESTED		Field Parameters Analyzed By:	LITARY TIME (24 HOUR CLOCK, I.E. 8AM IS 0800, 4 PM IS 1600) DELIVERY METHOD: CLOC COURIER CLICLIENT CUSTOM COMMENTS:	Hazardous: yes/no
Lab LIMS No:		######################################	ANA ANA			E 1/7 1/1 E	TIME Haza
CUSTODY		Number of Containers			Report Format: □ Standard □ Forms	PLE CUSTODY EXCHANGES MUST BE DOCUMENTED BELOW. USE FULL LEGAL SIGNATURE, DATE AND USHED BY SAMPLER CASHED BY SAMPLER DATE TIME HECEIVED BY UISHED BY	DATE
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